



**OFFICIAL**

# Culture Reform Oversight Group Agenda

Monday, 9 August 2021

1.00pm-4.00pm

Boardroom, Level 5, 6 Bowes St/Via WebEx

		Sponsor	
<b>Item 1</b>	<b>Welcome and apologies</b>		
	1.1 Introductions	Chair	5 min
<b>Item 2</b>	<b>Presentation</b>		
	2.1 Annual Review of Culture Review Implementation Update	D-G, ACTHD	50 min
	2.2 Speaking Up For Safety – CHS	Interim CEO CHS	20 min
	2.3 Organisation Progress Update – CHS	Interim CEO CHS	
<b>Item 3</b>	<b>Decision and discussion items</b>		
	3.1 Management of Allegations of Bullying and Harassment – Organisation Updates	Chair	15 min
	3.2 Working Group Updates	Chair	30 min
	3.3 Choosing Wisely – Calvary Public Hospital Bruce Update	Regional CEO, Calvary ACT	5 min
<b>Item 4</b>	<b>Updates</b>		
	4.1 Member Updates (Verbal)	All Members	30 min
<b>Item 5</b>	<b>Noting Items</b>		
	5.1 Culture Reform Oversight Group Meeting – Minutes and Action Items – 29 June 2021		
	5.2 Culture Review Implementation Program Plan		
	5.3 Implementation of Recommendations and Project Plan		
	5.4 Culture Review Implementation Program Risk		

5.5 Culture Review Implementation Steering Group  
Meeting Minutes – 22 June 2021 Meeting

5.6 Culture Review Implementation Budget Update

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<b>Item 6</b>	<b>Other Business</b>		
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6.1 Oversight Group Communique	Chair	5 min	
6.2 Oversight Group Key Messages	Chair	5 min	

**Next meetings:**

27 October 2021

13 December 2021



# Culture Reform Oversight Group Meeting Paper

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Agenda Item:	2.1
Topic:	Presentation: Cultural Review Implementation - Second Annual Review
Meeting Date:	9 August 2021
Action Required:	Noting and Discussion
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Ms Renee Leon

## Purpose

1. To provide the Reviewer, Ms Leon, an opportunity to meet with the Culture Reform Oversight Group (Oversight Group) to present and discuss her findings from the second Annual Review of the Culture Review Implementation.

## Background

2. Recommendation 19 of the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services* (the Culture Review) states “That the ‘Culture Review Oversight Group’ auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the Review and consequent impact on cultural changes within the ACT Public Health System”.
3. At the Oversight Group meeting on 1 March 2021, the Oversight Group agreed on the Terms of Reference for the second annual review. These are at [Attachment A](#).
4. Ms Renee Leon was contracted to conduct the annual independent and external review and work commenced in May 2021.
5. Ms Leon has met with all Oversight Group members and other key stakeholders, and has conducted focus groups with employee representatives from:
  - a. ACT Health Directorate,
  - b. Calvary Public Hospital Bruce,
  - c. Clinical Leadership Forum,
  - d. Professional Colleges Advisory Group,
  - e. CPSU members, and

f. ANMF members.

6. Ms Leon discussed her preliminary findings at the Oversight Group meeting on 29 June 2021.

#### **Issues**

7. The final report of the 2021 Annual Review of the Culture Review Implementation is expected to be provided to the Minister for Health before 31 August 2021.

#### **Presentation**

8. Ms Leon's presentation will enable discussion of the findings from the second Annual Review.

#### **Recommendation**

That the Oversight Group:

- *Note the presentation provided by Ms Renee Leon.*



Culture Review **Implementation**

our journey of positive change



## Culture Review Oversight Group

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### Culture Review Implementation: Annual Review Terms of Reference

#### Purpose

1. To outline the scope and terms of reference of the second annual review of the Culture Review Implementation program in support of achieving the 20 recommendations as outlined in the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services* (the Review).

#### Background

2. On 10 September 2018, the former Minister for Health and Wellbeing announced the establishment of an Independent Review into the Workplace Culture within ACT Public Health Services.
3. The Culture Review Report was released by the former Minister for Health and Wellbeing on 7 March 2019.
4. The former Minister for Health and Wellbeing; Minister for Mental Health; Director-General, ACT Health Directorate; Chief Executive Officer, Canberra Health Services; and Regional Chief Executive Officer, Calvary Hospital jointly and publicly committed to implement the 20 recommendations in the Culture Review Report. This was further supported by a Public Commitment Statement released on 4 September 2019 by leaders of the organisations represented on the Culture Review Oversight Group (Oversight Group).
5. The Oversight Group is commissioning an annual review of the culture review implementation process and progress, in line with Recommendation 19, in the Culture Review Report, which states:

*'That the 'Culture Review Oversight Group' auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the Review and consequent impact on cultural changes within the ACT Public Health Services'.*

6. The annual review process is an important independent assessment of the culture review implementation process and its progress in implementing the 20 recommendations in the Culture Review Report. It represents an important learning opportunity and transparent accountability mechanism.

#### Scope

7. The scope and focus of this annual review will be to examine, and make findings and recommendations in relation to the following:
  - a. Record any changes or amendments to the recommendations of the Review of a not insubstantial nature and the reasons for making such changes or amendments.

- b. The extent of the progress made with the culture review implementation process against the original plans outlined in the Report;
- c. The impact on the workforce culture from the changes introduced to date; and
- d. The effectiveness of the initiation and planning phase of the culture review implementation process, given that the focus is now in implementation phase, including:
  - i. What has worked well and why, and has there been any early impact?
  - ii. What has not worked well and why, and has there been any impact?
  - iii. What may therefore need to change or be improved?
  - iv. What has been learned so far and how can these insights and experiences be leveraged to improve the process and outcomes/impact of the culture review implementation process?

## Methodology

- 8. The annual review process will draw upon information from a range of sources across the three arms of the ACT public health system, to strengthen its analysis and avoid duplication of effort.
- 9. It is proposed that the annual review include:
  - a. A desktop review of key documentation produced as part of the culture review implementation process across the three organisations. This will include:
    - i. public statements, documentation from the governance and stakeholder engagement bodies (i.e. the Culture Review Oversight Group, Culture Review Implementation Steering Group, Clinical Leadership Forum, and Health and Wellbeing Partnership Board) as well as from the leadership and staff within each of the three public health organisations;
    - ii. Internal strategies developed by each of the three public health organisations that link to the overarching Culture Review Implementation strategy;
    - iii. information generated by key initiatives occurring under the banner of the culture review implementation process (e.g. the ANU partnership to develop a Workplace Culture Framework, and the HR Functions Review); and
  - b. access to staff climate surveys, and any work progressed as a result of the surveys;
  - c. access to workforce data and metrics relevant to assessing the impact of the culture review implementation (although negotiation with provider seeking permission in line with IP rights about survey design required);
  - d. access to organisation Workforce Profile Dashboards;
  - e. access to Organisation Culture Improvement Model (OCIM) baseline (2019) and 2020 assessments;
  - f. One-on-one interviews with a cross-section of key stakeholders:
    - i. Minister for Health;
    - ii. Minister for Mental Health;
    - iii. Director-General, ACT Health Directorate;
    - iv. Chief Executive Officer, Canberra Health Services;

- v. Regional Chief Executive Officer, Calvary ACT;
  - vi. select members of the Culture Review Oversight Group and Culture Review Implementation Steering Group; and
  - vii. other nominated key stakeholders.
- g. Opportunity for focus groups or discussions including:
- i. From a cross-section of the workforce across the ACT public health system;
  - ii. With members from the Clinical Leadership Forum; and
  - iii. Members from the Professional Colleges Advisory Group.
10. Development of a draft Annual Review Report containing findings and initial recommendations for discussion with key leaders; and
11. Finalisation and submission of an Annual Review Report by 30 May 2021.

### **Structure, Process and Timing**

12. The Reviewer will commence work on this review in March 2021 and will provide an Annual Review Report to the Minister for Health and the Minister for Mental Health by 30 May 2021.
13. The Minister for Health will table the Annual Review Report in the ACT Legislative Assembly at the earliest opportunity, and thereafter publicly release the Report.
14. The Reviewer will determine if some material needs to be anonymised to protect individuals from harm, to the extent that it contains personal information or material provided in confidence.
15. The Oversight Group will ensure that the management response to the Annual Review Report guides the next phase of the culture review implementation process and associated initiatives.





# Culture Reform Oversight Group Meeting Paper

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Agenda Item:	2.2
Topic:	Presentation: Speaking up for Safety Implementation in Canberra Health Services
Meeting Date:	9 August 2021
Action Required:	Discussion
Cleared by:	Interim Chief Executive Officer, Canberra Health Services
Presenter:	Interim Chief Executive Officer, Canberra Health Services

## Purpose

1. Both Calvary Public Hospital Bruce (CPHB) and Canberra Health Services (CHS) have been implementing the Speaking up for Safety (SUFS) program through The Cognitive Institute.
2. CHS will present on the background to the program, progress to date and lessons learnt through the implementation of the train-the-trainer program.

## Background

3. Recommendation 3 of the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services* (the Culture Review) states:

*That a program designed to promote a healthier culture to reduce inappropriate workplace behaviour and bullying and harassment be implemented across the ACT Public Health System. The model adopted should be based on the Vanderbilt University Medical Center Patient Advocacy Reporting System (PARS) and Co-worker Observation Reporting System (CORS).*

4. The purpose of the presentation is to provide:
  - a. Background to the SUFS program,
  - b. Information on the program,
  - c. Progress by CHS in implementing the program, and
  - d. Information on lessons learnt to date.

## Issues

5. The implementation of SUFS commented in CHS in May 2021.



## **Recommendation**

That the Oversight Group:

- *Note the presentation provided by CHS on the implementation of the Speaking Up for Safety program.*



## Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

<b>Agenda Item:</b>	2.3
<b>Topic:</b>	<b>Organisation Progress Update – Canberra Health Services</b>
<b>Meeting Date:</b>	9 August 2021
<b>Action Required:</b>	<b>Discussion</b>
<b>Cleared by:</b>	<b>Interim Chief Executive Officer, Canberra Health Services</b>
<b>Presenter:</b>	Interim Chief Executive Officer, Canberra Health Services

### Purpose

1. That members note the presentation from the Interim Chief Executive Officer (CEO), Canberra Health Services (CHS), providing an update on the management of referrals from the Panel conducting the Independent Review in the organisation.

### Background

2. At the Oversight Group on 4 September 2019, the then Chief Executive Officer, Canberra Health Services presented on the progress made on managing the referrals initiated through the Panel from the Independent Review. Ms McDonald provided a comprehensive presentation outlining how the initial approach applied to referral areas at CHS was being generalised to assessing and understanding broader issues and challenges arising in other work areas.
3. CHS provided a further update at the 27 February 2020 Oversight Group meeting on their progress in managing referrals from the Panel.

### Recommendation

That the Oversight Group:

- *note the information about progress made in addressing the referrals from the Panel provided by the Interim Chief Executive Officer, Canberra Health Services.*



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# Culture Reform Oversight Group Meeting Paper

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**Agenda Item:** 3.2

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**Topic:** Working Groups Update

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**Meeting Date:** 9 August 2021

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**Action Required:** Discussion

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**Cleared by:** Director-General ACT Health Directorate

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**Presenter:** Chair

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## Purpose

1. To provide the Culture Reform Oversight Group (Oversight Group) with an update of the progress made with the three Oversight Group working groups.

## Background

2. As an outcome from the Oversight Group workshop on 18 March 2021, it was agreed that three working groups would be established to:
  - Develop solutions to matters that impacted the system,
  - Develop a model to adopt to support effective discussion, and
  - Agree on the scope of work and a work program.
3. The initial meetings of the three working group were held over the period 11-17 June 2021 with discussions for each working group progressing to a different point due to the understanding of the purpose of the working group and scope.

## Issues

4. Further meetings of the three working groups have been held over the period 14-28 July 2021:
5. The Chairs of all three working groups have been confirmed as follows:
  - a. System-wide HR Matters – Ms Rebecca Cross;
  - b. Professional Transition to Work – Professor Jane Frost; and
  - c. Early Intervention – Ms Barb Reid.

6. The Terms of Reference for the Early Intervention Working Group (Attachment A) is provided for Oversight Group endorsement.

**Recommendation**

That the Oversight Group:

- *Note the updates provided for the three Oversight Group Working Groups; and*
- *Endorse the Terms of Reference for the Early Intervention Working Group.*



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## Culture Reform Oversight Group Early Intervention Working Group TERMS OF REFERENCE

<b>Role</b>	<p>The <b>Early Intervention Working Group</b> (Working Group) is responsible for identifying system-wide issues that have or are likely to have an impact on culture across the ACT public health system.</p> <p>This will entail identifying issues early, describing and quantifying the issues and identifying strategies to address or mitigate the issues. This might result in a matter being referred to another group or being escalated to the Culture Reform Oversight Group (Oversight Group).</p> <p>The Working Group will act as a conduit for consultation and feedback with its member networks and stakeholders – both to identify emerging issues, and to communicate strategies that have been agreed.</p> <p>The Working Group will report back to the Oversight Group.</p>
<b>Values and Behaviours</b>	<p>Participation and engagement in the Working Group will reflect organisational values and the commitment to collaborate within strong governance frameworks. Members will display signature behaviours such as:</p> <ul style="list-style-type: none"><li>• Being accountable and transparent in decision-making;</li><li>• Genuine and respectful engagement with colleagues within the Directorates, across the ACT Public Service and the Health System, with community members and within the working group;</li><li>• Open sharing of information to improve the exploration of ideas and concepts linked to early productive discussion that supports solution-focussed thinking about concerns being raised by people 'on the ground' within the ACT public health system; and</li><li>• Innovative improvement of engagement to support the workforce of the ACT public health system.</li></ul>
<b>Membership</b>	<ul style="list-style-type: none"><li>• Director-General, ACT Health Directorate</li><li>• Chief Executive Officer, Canberra Health Services (CHS)</li><li>• Regional Chief Executive Officer, Calvary ACT</li><li>• Executive Group Manager, People &amp; Culture, CHS</li><li>• Australian Nursing and Midwifery Federation (ANMF) ACT Representative</li><li>• Regional Secretary of the Community and Public Sector Union (CPSU)</li><li>• Deputy Director-General, Workforce, Capability &amp; Governance, Chief Minister, Treasury and Economic Development Directorate (CMTEDD)</li></ul>

	<ul style="list-style-type: none"> <li>• Executive Group Manager, WhoG Industrial Relations and Public Sector Employment, CMTEDD</li> <li>• President Visiting Medical Officers Association (VMOA) ACT</li> <li>• Health Care Consumers Association (ACT) Representative</li> <li>• Australian Salaried Medical Officers Federation (ASMOF) ACT Representative</li> <li>• Senior Adviser, Minister for Health</li> <li>• President Australian Medical Association ACT Limited (AMA)</li> </ul> <p>The Working Group may also invite other individuals or representatives of organisations from time to time with the agreement of the Working Group where special expertise or experience is required to assist the Group in its work.</p> <p>Members will be asked to declare any actual, potential, or perceived conflicts of interest, at each meeting.</p> <p>There will be no sitting fees provided for meetings.</p>
<b>Secretariat</b>	Secretariat Support will be initially provided by the Culture Review Implementation Team until 31 December 2021.
<b>Meeting Frequency</b>	<p>Meetings are to be held 6-8 weekly, aligning with Oversight Group meetings where possible, or as required by the Chair.</p> <p>Urgent meeting may be convened if deemed necessary.</p>
<b>Absences from Meetings and Proxy Attendance</b>	<p>All Members are strongly encouraged to prioritise meetings.</p> <p>The Working Group supports a process of proxies however it is strongly encouraged that a commitment is made by individuals to maintain the momentum of discussions and work being progressed by the Working Group.</p>
<b>Functions</b>	<p>The Working Group will:</p> <ul style="list-style-type: none"> <li>• Engage with membership and stakeholders to develop a process for: <ul style="list-style-type: none"> <li>○ identifying emerging issues that have the potential of impacting the broad workforce across the ACT public health system, for consideration by the working group;</li> <li>○ seeking background information, data, evidence and advice on those issues; and</li> <li>○ communicating back the working group's consideration of the issues and any strategies agreed to address or mitigate them.</li> </ul> </li> <li>• Confirm there is a shared view that the issues are system-wide and may impact on culture. This may include: <ul style="list-style-type: none"> <li>○ Quantifying, exploring and understanding the issue;</li> <li>○ Understanding the scope of impact i.e. infrastructure, communications, marketing, change management;</li> </ul> </li> <li>• Consider what metrics (lead indicator of culture) will be impacted on by the issue without early intervention, including ongoing monitoring and assessment of metrics.</li> <li>• Agree what early intervention strategies might be to address or mitigate the issue and make recommendations on which group or organisation is best placed to implement those strategies, including the Oversight Group or other working groups.</li> </ul>



	<ul style="list-style-type: none"> <li>Based on the experience of the working group, develop a model that formalises the above processes.</li> </ul>
<b>Reporting Mechanisms</b>	<p>The Working Group will provide regular updates to the Oversight Group on the agreed scope of work, agreed action plans and progress being made.</p> <p>Updates will be included in the Culture Reform Oversight Group Communique and Key Message documents.</p>
<b>Meetings and Agenda Requests</b>	<p>Meeting papers and the Agenda will be cleared by the Chair and circulated one week in advance of meetings.</p> <p>Meeting papers will be considered in-confidence by all members and the executive of each represented stakeholder group.</p> <p>Papers will be distributed to members electronically five working days prior to the meeting taking place.</p>
<b>Standing Agenda Items</b>	<p>A summary of standing agenda items is at <a href="#">Attachment A</a>.</p>
<b>Minutes</b>	<p>The Secretariat will prepare minutes of each meeting, and record actions items. Minutes and action items will be distributed within two weeks of the meeting taking place.</p>
<b>TOR Review Frequency</b>	<p>The Terms of Reference will be reviewed annually, or as required to ensure alignment with governance arrangements.</p> <p>The next review is due by June 2022.</p>
<b>TOR Approval</b>	



## Culture Reform Oversight Group Meeting Paper

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**Agenda Item:** 3.3

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**Topic:** Choosing Wisely – Calvary Public Hospital Bruce Update

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**Meeting Date:** 9 August 2021

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**Action Required:** Discussion

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**Cleared by:** Regional CEO, Calvary ACT

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**Presenter:** Regional CEO, Calvary ACT

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### Purpose

1. To provide the Culture Reform Oversight Group (Oversight Group) with a progress update on the implementation of the Choosing Wisely program at Calvary Public Hospital Bruce (CPHB).

### Background

2. Recommendation 11 of the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services* (the Culture Review) states:

*Canberra Health Services and Calvary Public Hospital should assess the appropriateness of the Choosing Wisely initiative as a mechanism for improving safety and quality of care, developing improved clinical engagement and greater involvement in clinical governance.*

### Issues

3. In June 2020 the Choosing Wisely initiative was endorsed by executives as an initiative to be implemented in CPHB.
4. CPHB has developed a Project Governance and Reporting Communication and Stakeholder Engagement Matrix which outlines the communication plan, roles and responsibilities and provides the governance and support to manage the initiative.
5. CPHB is focussing on two of the Choosing Wisely recommendations to engage clinicians to ensure treatments and tests are in line with up-to-date evidence, are patient focussed and with the goal to minimise unnecessary and low-value treatments, tests, and practices.
6. Ms Reid will provide members with an update on the progress of implementing Choosing Wisely.

## **Recommendation**

That the Oversight Group:

- *Note the information provided in the implementation of the Choosing Wisely program at Calvary Public Hospital Bruce.*



# Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

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**Agenda Item:** 4.1

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**Topic:** Member Updates

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**Meeting Date:** 9 August 2021

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**Action Required:** Discussion

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**Cleared by:** Director-General, ACT Health Directorate

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**Presenter:** All members

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## Purpose

1. An opportunity for members to provide an update on progress being made, including initiatives, identified themes, collaboration and risks related to the implementation and progression of culture reform across the ACT public health system.

## Background

2. The Culture Reform Oversight Group (Oversight Group) provides opportunity at each meeting for members to talk about progress, themes, and challenges in progressing culture reform across the ACT public health system.

## Recommendation

That the Oversight Group:

- *Note the information provided by members about progress, themes, and challenges in culture reform across the ACT public health system.*



# Culture Reform Oversight Group Meeting Paper

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**Agenda Item:** 5.2

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**Topic:** Culture Review Implementation Program Plan

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**Meeting Date:** 9 August 2021

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**Action Required:** Noting and Feedback

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**Cleared by:** Director-General, ACT Health Directorate

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**Presenter:** Executive Branch Manager, Culture Review Implementation Branch

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## Purpose

1. To provide the Culture Reform Oversight Group (Oversight Group) with the current Culture Review Implementation Program Plan 2019-2022 (Program Plan) for information and to seek feedback from members.

## Background

2. The Program Plan 2019-2022 (Program Plan) at Attachment A is an overarching strategic framework for the Culture Review Implementation program.
3. The Program Plan 2019-2022 outlines how the health services across the ACT public health system are working together to lay the groundwork for the future. With a strong focus on organisational behaviour, workforce, and leadership change, and building a solid evidence-base, this Program Plan puts in place the strategic projects and actions which will provide the foundations to drive long-term results while also implementing priority actions in the short-term.
4. The Program Plan is intended to be a living document that will be revised over time to reflect:
  - New challenges and priorities,
  - Emerging evidence and opportunities, and
  - Complementary strategic interventions and responses on workplace culture across the ACT public health system.
5. The three pillars of the Program Plan are:
  - Organisational Behaviour, Workforce and Leadership;
  - Education and Research; and
  - Structure and Engagement.

6. Feedback on the Program Plan is invited from the Oversight Group members. Members are encouraged to provide ongoing feedback to the Secretariat as the Program Plan evolves.
7. Agenda Item 5.3, Implementation of Recommendations and Project Plan, nests beneath the Program Plan.

## **Issues**

8. The key area of focus for the Program Plan continues to be on developing strategic actions and interventions under the pillar of Organisational Behaviour, Workforce and Leadership to set the foundations for sustainable and measurable culture change.
9. Key strategies during this phase include:
  - a. Ensuring that an evidence-based methodology is applied to the design and evaluation of interventions;
  - b. Defining the capabilities required to flexibly respond to the identified issues; and
  - c. Investing in capability development of the workforce to support organisational behaviour, workforce, and leadership change.
10. Changes to the Program Plan this reporting period include:
  - d. Organisational Values (Recommendation 1) – inclusion of key initiatives delivered by each organisation to embed the values;
  - e. Measures (Recommendation 2) – inclusion of actions identified by CHS and CPHB to measure patient/client outcomes and experience;
  - f. Promoting a Healthier Culture (Recommendation 3) – inclusion of actions identified by CHS and CPHB for preventing and resolving workplace issues and for improving performance development;
  - g. Role of Human Resources (Recommendation 14) – establishment of the Culture Reform Oversight Group working groups (HR Matters and Early Intervention Working Groups); and
  - h. Academic partnerships Research and Training (Recommendation 7) – establishment of the Culture Reform Oversight Group Professional Transition to Work Working Group.
11. Each organisation will provide an update on the initiatives being progressed at Agenda Item 4.1 Member Updates.

## **Recommendation**

That the Oversight Group:

- *Note the Program Plan for the Culture Review Implementation.*



# Program Plan 2019-2022

August 2021

RECOMMENDATIONS

GOAL

KEY ACHIEVEMENTS

KEY INITIATIVES IN PROGRESS

NEXT 6 MONTHS

## ORGANISATIONAL BEHAVIOUR, WORKFORCE & LEADERSHIP

1, 2, 3, 13, 14, 15, 16

> *We will invest in our people and processes to build safe and positive workplaces across the system*

- Vision, values and desired behaviours incorporated into organisational and people-related practices and strategic and business planning.
- Review of HR functions and strengthening of employee support services.
- Analysis of Respect, Equity and Diversity Contact Officers (REDCO) Network and complaints and grievances processes to identify opportunities for enhancement.
- Workplace Culture Framework (WCF) developed, providing an evidence-based roadmap for sustainable and measurable cultural change.
- Organisational Culture Improvement Model (OCIM) developed and piloted in 2020, to support ongoing assessment and measurement against the key organisational factors that support culture.
- Review of 'people' training programs delivered by each organisation.
- HR Matters and Early Intervention (Union Consultation) working groups have been established. Working groups will provide advice to the Culture Reform Oversight Group.

- Pilot the Unit Level OCIM in ACTHD and undertake 2021 OCIM assessments within each organisation.
- Continue to evolve organisational health indicators and develop a system-wide dashboard to monitor the impact of interventions.
- Finalise procurement for development of management fundamentals and middle management leadership training programs for the ACT public health system.
- Continue rollout of Speaking Up for Safety Program.

- Develop and deliver management fundamentals and leadership training programs.
- Working groups to identify priorities and establish work plans.
- Evaluation of REDCO, complaints and grievances and recruitment processes to assess impact of changes.

## EDUCATION & RESEARCH

7

> *Through strong collaboration, partnership and engagement we will develop and shape a learning mindset across the system*

- Health and Wellbeing Partnership Board established to drive collaborative relationships across education, research and health services sectors.
- The Professionals Transition to Work Working Group has been established. The working group will provide advice to the Culture Reform Oversight Group.

- Development of a strategic research plan for the ACT health system.

- Working groups to identify priorities and establish work plans.

## STRUCTURE & ENGAGEMENT

4, 5, 6, 8, 9, 10, 11, 12, 20

> *We will encourage and embed a two-way discourse with our staff, our stakeholders and our partners to evolve our system*

- NGO Leadership Group has been established.
- A networking event was conducted in February 2021 for senior clinicians and administrators from across the public health system to discuss clinical service coordination and collaboration.
- A Communication and Engagement Strategy has been developed through consultation with key stakeholders. The Phase 2 Communications and Engagement Action Plan is being delivered in partnership with each organisation.
- The bi-monthly Culture Connect newsletter has been launched.
- Regular pulse surveys have been established at CHS.

- Continue to deliver the Phase 2 Communications and Engagement Action Plan.
- Establish pulse surveys within ACTHD.
- Preparation underway within each organisation for 2021 staff climate survey.

- Monitor and evaluate effectiveness of communications and stakeholder engagement.
- Evaluation of the NGO Leadership Group.
- 2021 staff climate surveys to be undertaken in each organisation in the second half of 2021.

## Organisational Behaviour, Workforce and Leadership



### Organisational Values (Recommendation 1)

#### ACT Health Directorate

Values Refresh Project

Values Champions

Annual DG Awards

People Strategy and Culture Plan 2021-22

#### Canberra Health Services

Values Refresh Project

Values, vision and role statements

Quarterly Values Showcase

Annual CEO Awards

Our People Framework

Fostering Organisational Improvement Strategy (FOCIS)

#### Calvary Public Hospital

Values in Action Framework

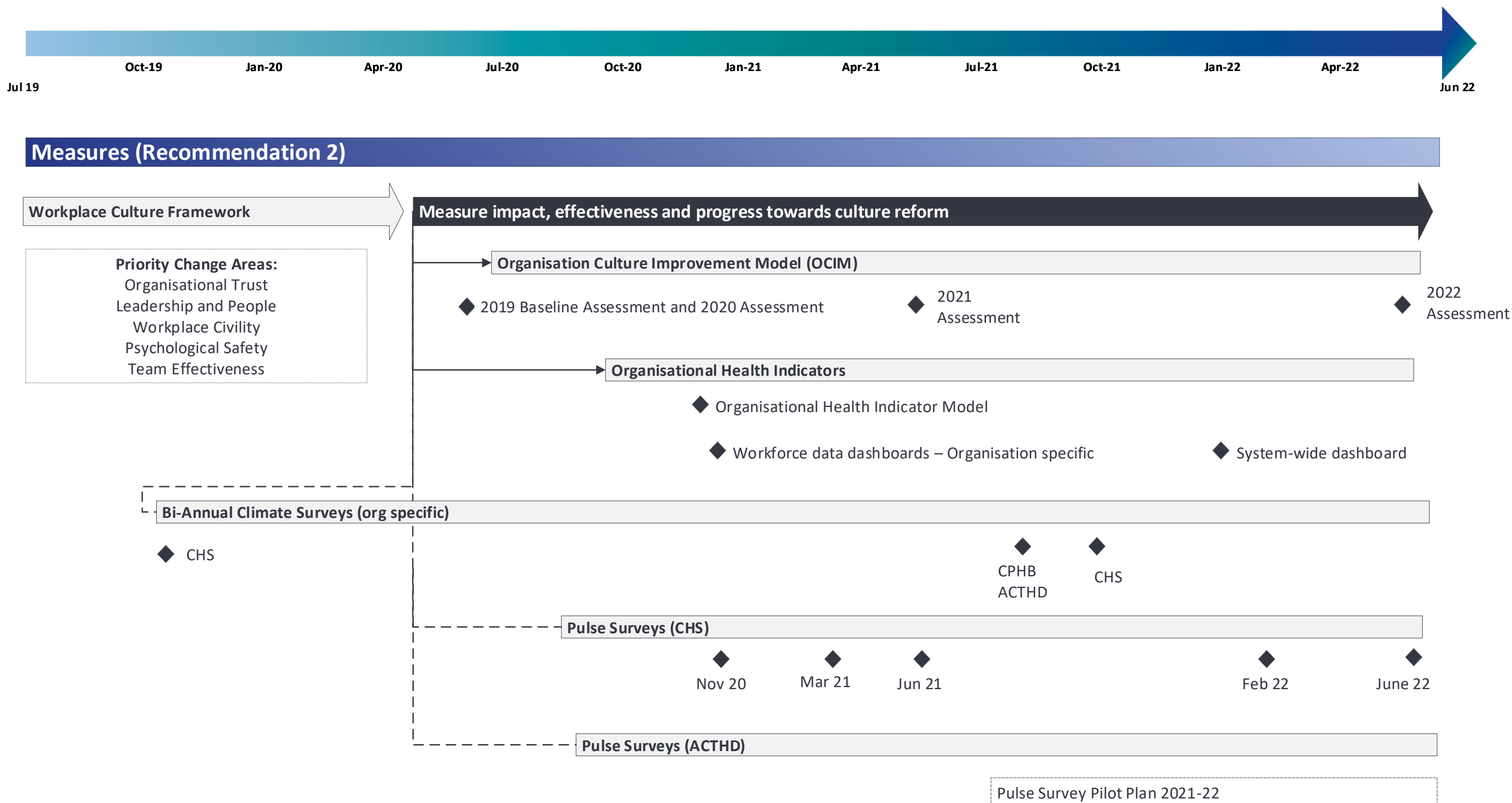
Staff development

Recruitment

Workforce planning

Performance Development Plans

## Organisational Behaviour, Workforce and Leadership





# Program Plan 2019-2022

## Organisational Behaviour, Workforce and Leadership



### Measures (Recommendation 2)

#### Measure Patient/Client Perspectives of Outcomes and Experience

Exceptional Care Framework 2020-2023 (CHS)

Partnering with Consumers Framework 2020-2023 (CHS)

Partnering with Consumer Committee (CPHB)

## Organisational Behaviour, Workforce and Leadership



### Promoting a Healthier Culture (Recommendation 3)

#### Speaking up for Safety

- ◆ Speaking up for Safety (CPHB)
- ◆ Speaking up for Safety Program (CHS)
- ◆ Promoting Professional Accountability Program (CHS)

#### Workplace Civility

- ◆ Workplace Civility Policy / Guidelines (CHS)
- ◆ Pilot Civility Program (CHS)

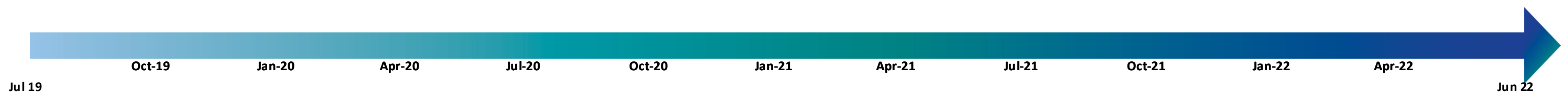
#### Culture Uplift Program

- ◆ Conscious Interactions and Being a Conscious Leader Training (ACTHD)

#### Occupational Violence Projects (CHS and CPHB)

- ◆ Occupational Violence Policy (CHS)
- ◆ Preventing Occupational Violence Policy / Procedure (CPHB)
- ◆ Framework for Preventing Workplace Violence and Aggression (CPHB)
- ◆ Creating a Circle of Respect Campaign (CPHB)

## Organisational Behaviour, Workforce and Leadership



### Promoting a Healthier Culture (Recommendation 3)

#### Strengthen Employee Support

##### Strengthen Respect, Equity and Diversity Contact Officer (REDCO)



##### Strengthen Complaints and Grievances Processes

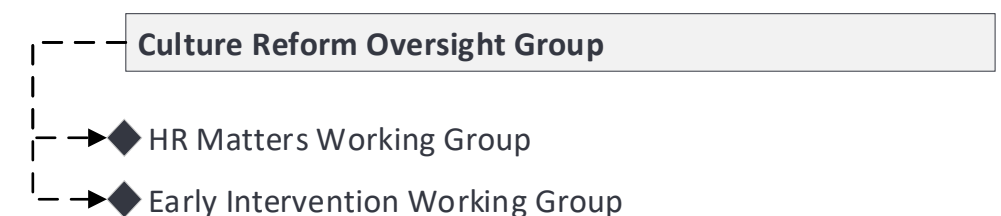


#### Preventing and Resolving Workplace Issues

◆ Workplace Resolution and Support Service (CHS and ACTHD)

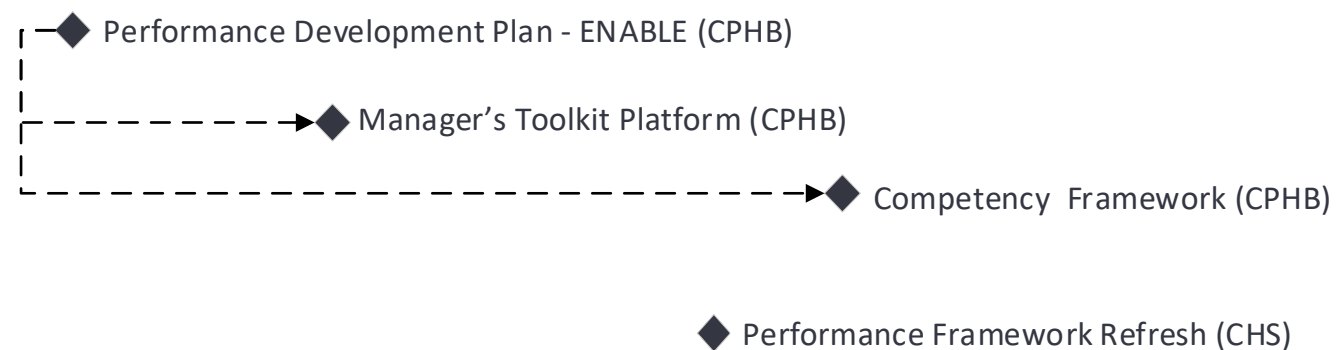
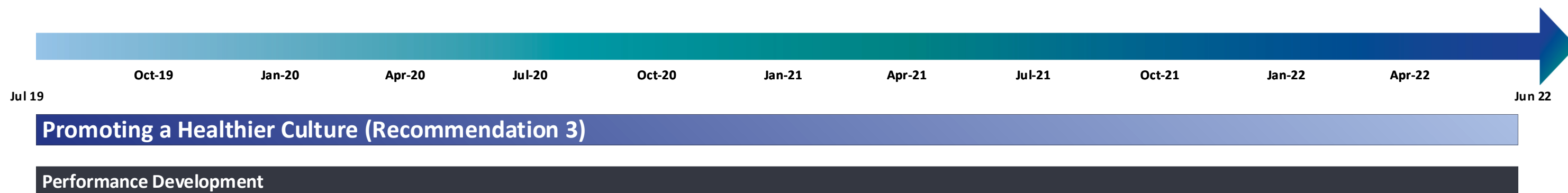
◆ Resolving Workplace Issues Fact Sheet (CHS)

◆ Preliminary Assessment Training (CHS)

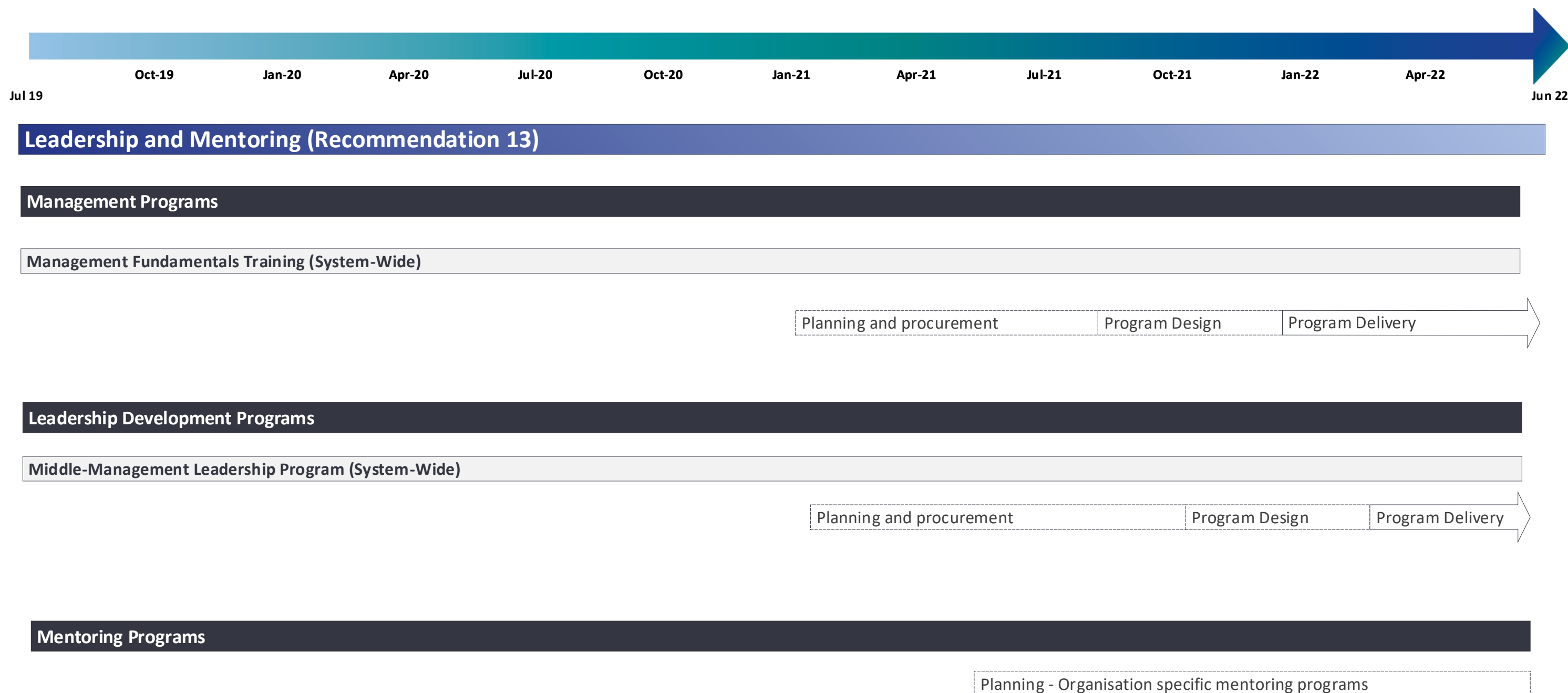




## Organisational Behaviour, Workforce and Leadership



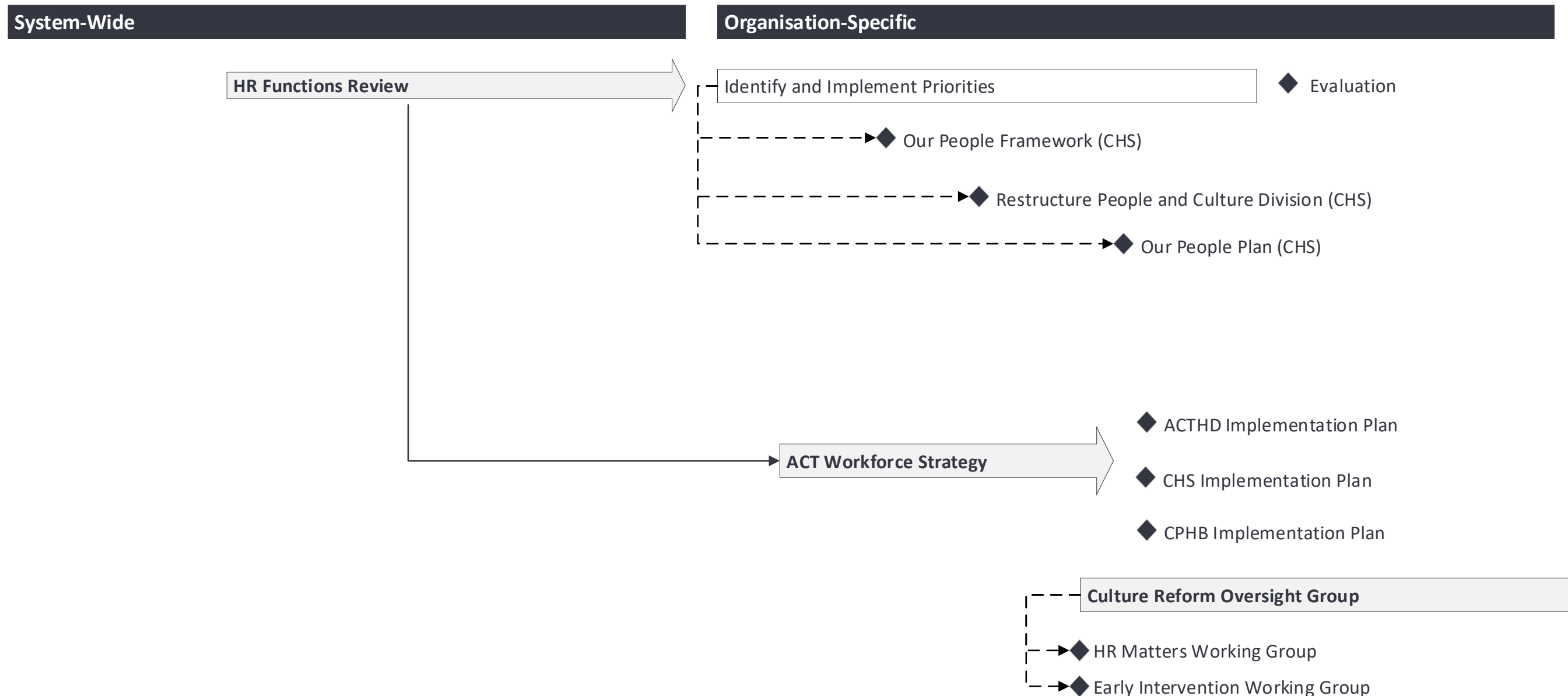
## Organisational Behaviour, Workforce and Leadership



## Organisational Behaviour, Workforce and Leadership



### Role of Human Resources (Recommendation 14)



## Organisational Behaviour, Workforce and Leadership



### Recruitment Processes (Recommendation 15)

#### Recruitment Processes



# Program Plan 2019-2022

## Organisational Behaviour, Workforce and Leadership



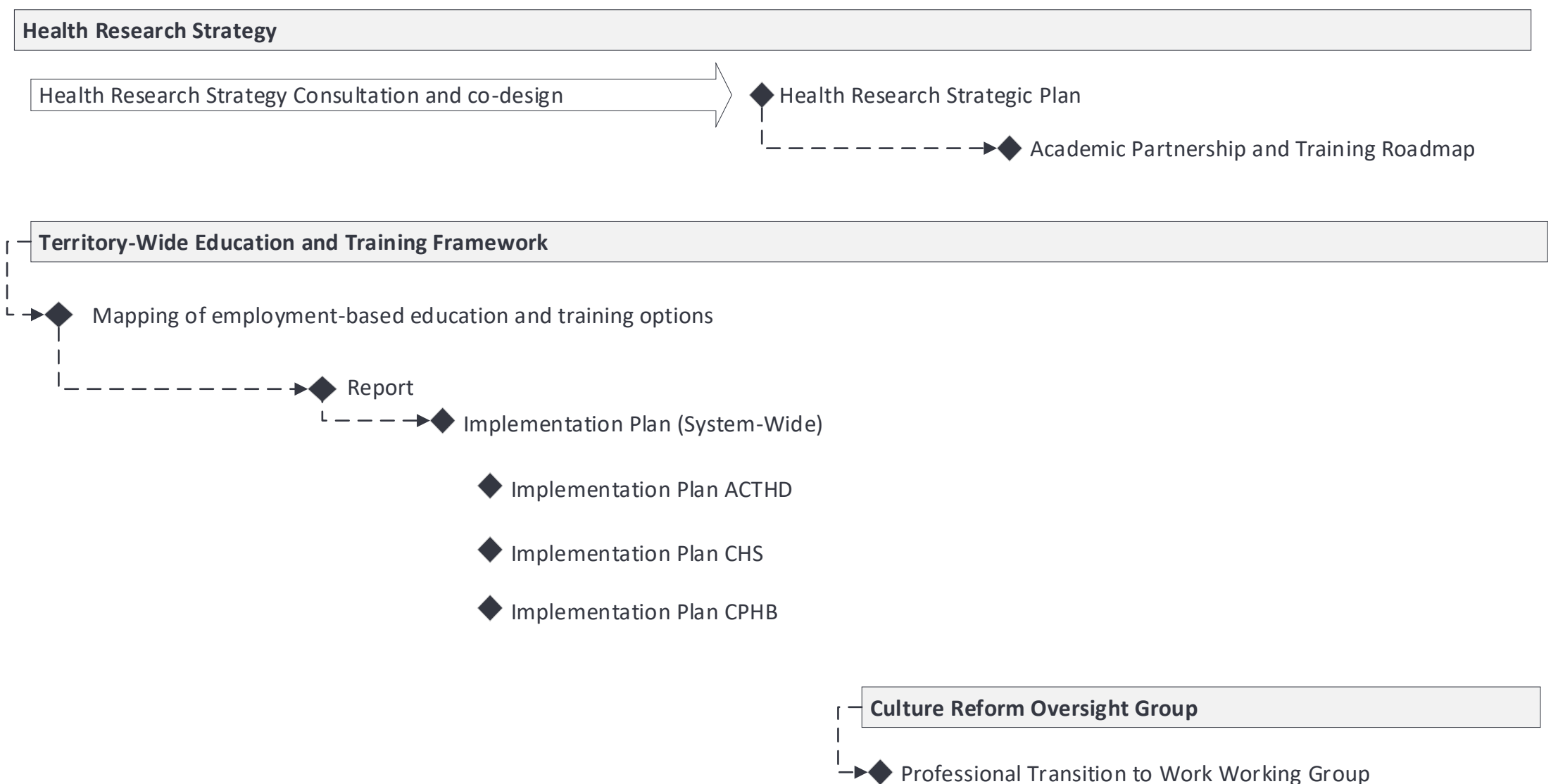
### Review People Management Training Programs (Recommendation 16)



## Education and Research



### Academic Partnerships, Research and Training (Recommendation 7)



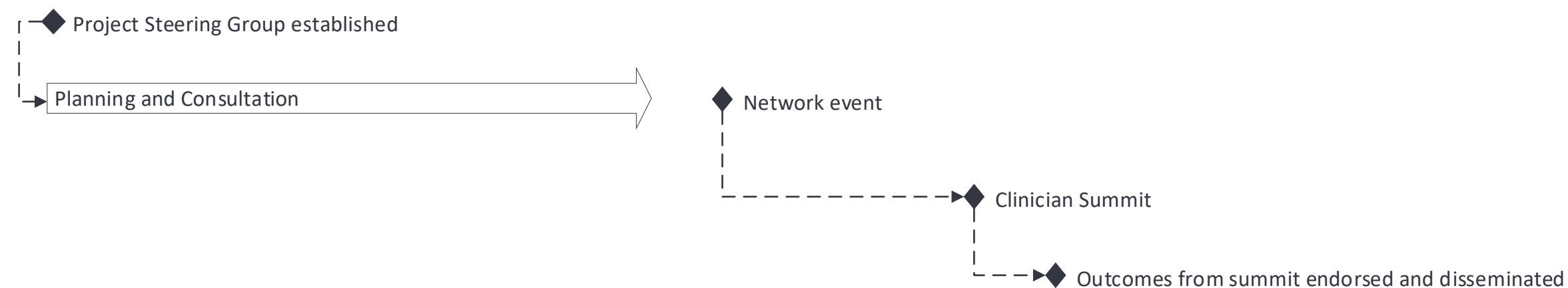


## Structure and Engagement



### Summit of Senior Clinicians and Administrators (Recommendation 4)

#### Clinician Summit



## Structure and Engagement



### Integration of Structures - Canberra Health Services (Recommendation 5)

Exceptional Care Framework

Clinical Governance Framework

#### Monitor and Evaluate

→ Attendance and frequency

→ Quarterly pulse surveys

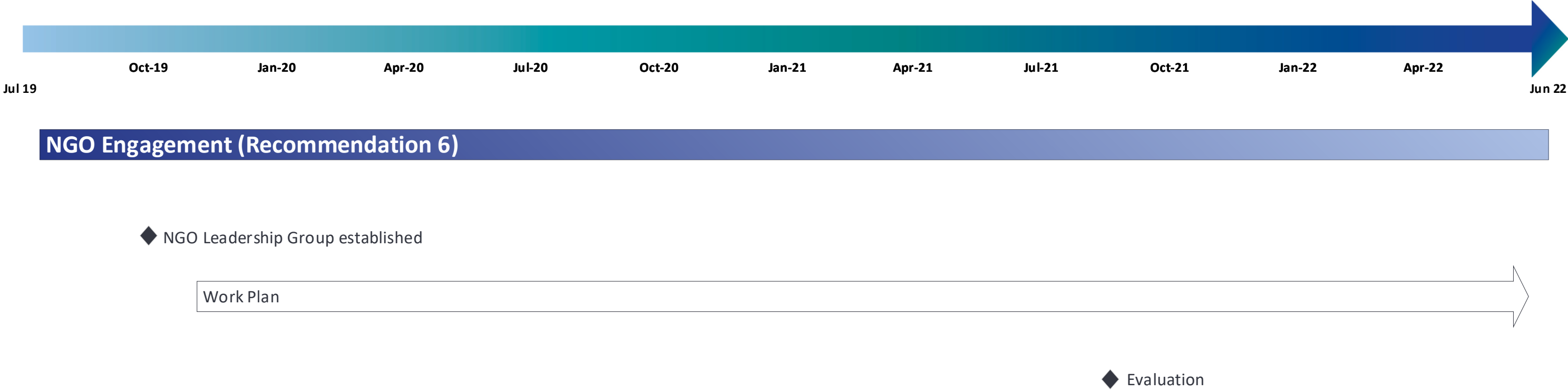
→ OCIM assessments

→ Workplace Culture Survey



# Program Plan 2019-2022

## Structure and Engagement

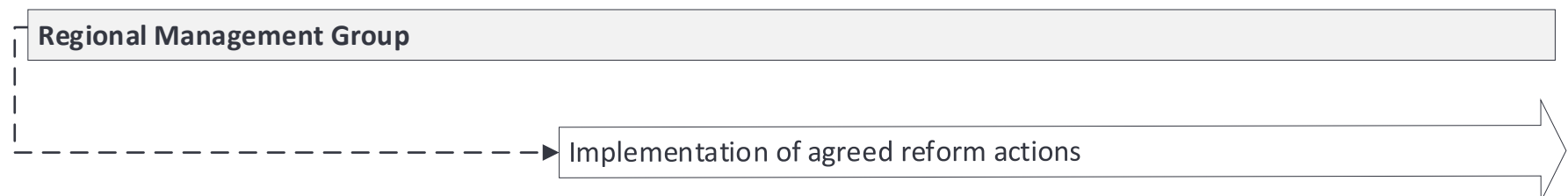


## Structure and Engagement



### MOU (Recommendation 8)

- ◆ Ministerial endorsement of draft ACT-NSW Health Partnership Agreement (2020-2025)



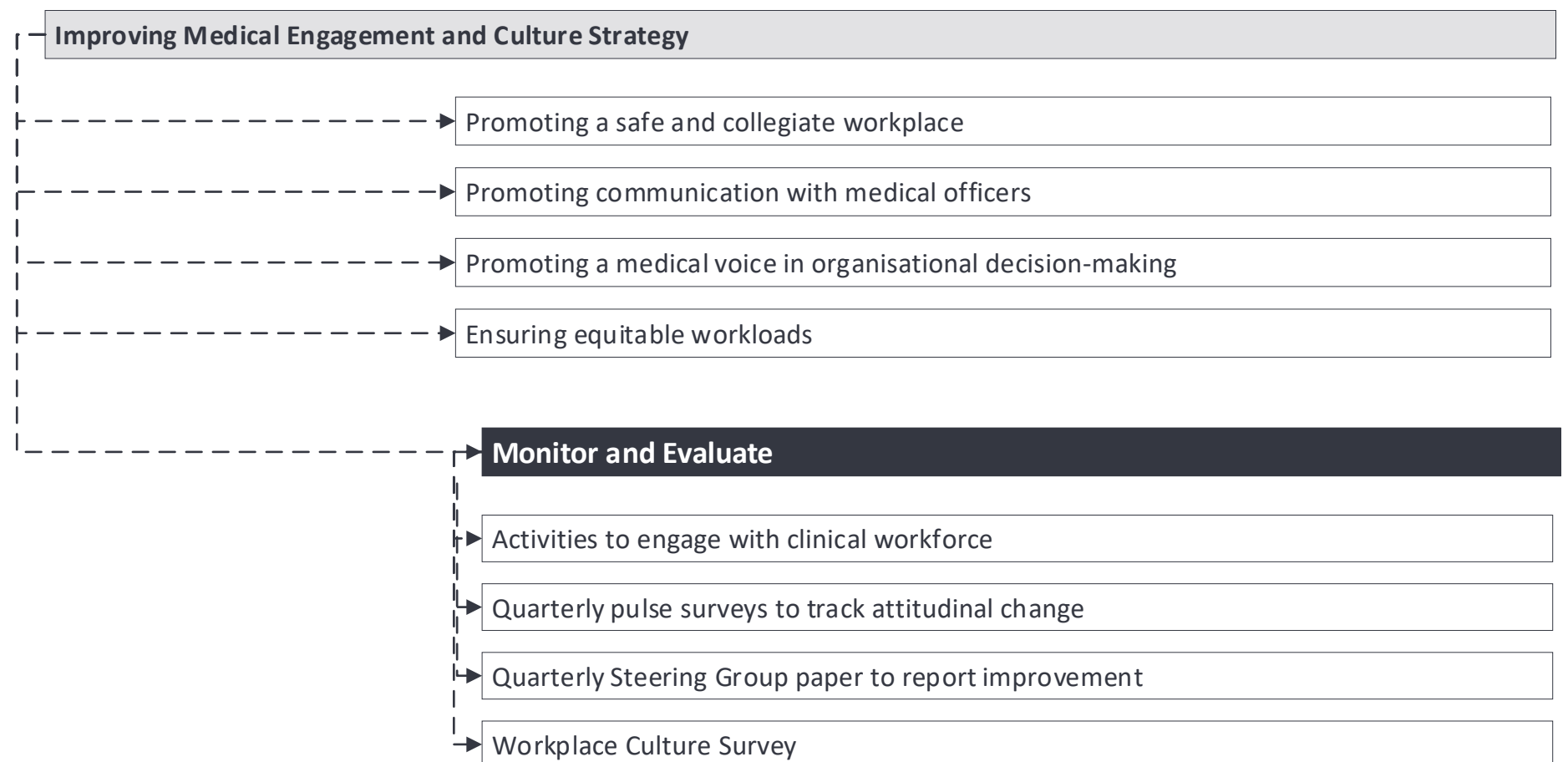
# Program Plan 2019-2022

## Structure and Engagement



### Improving and Measuring Clinical Engagement (Recommendation 9)

#### Canberra Health Services



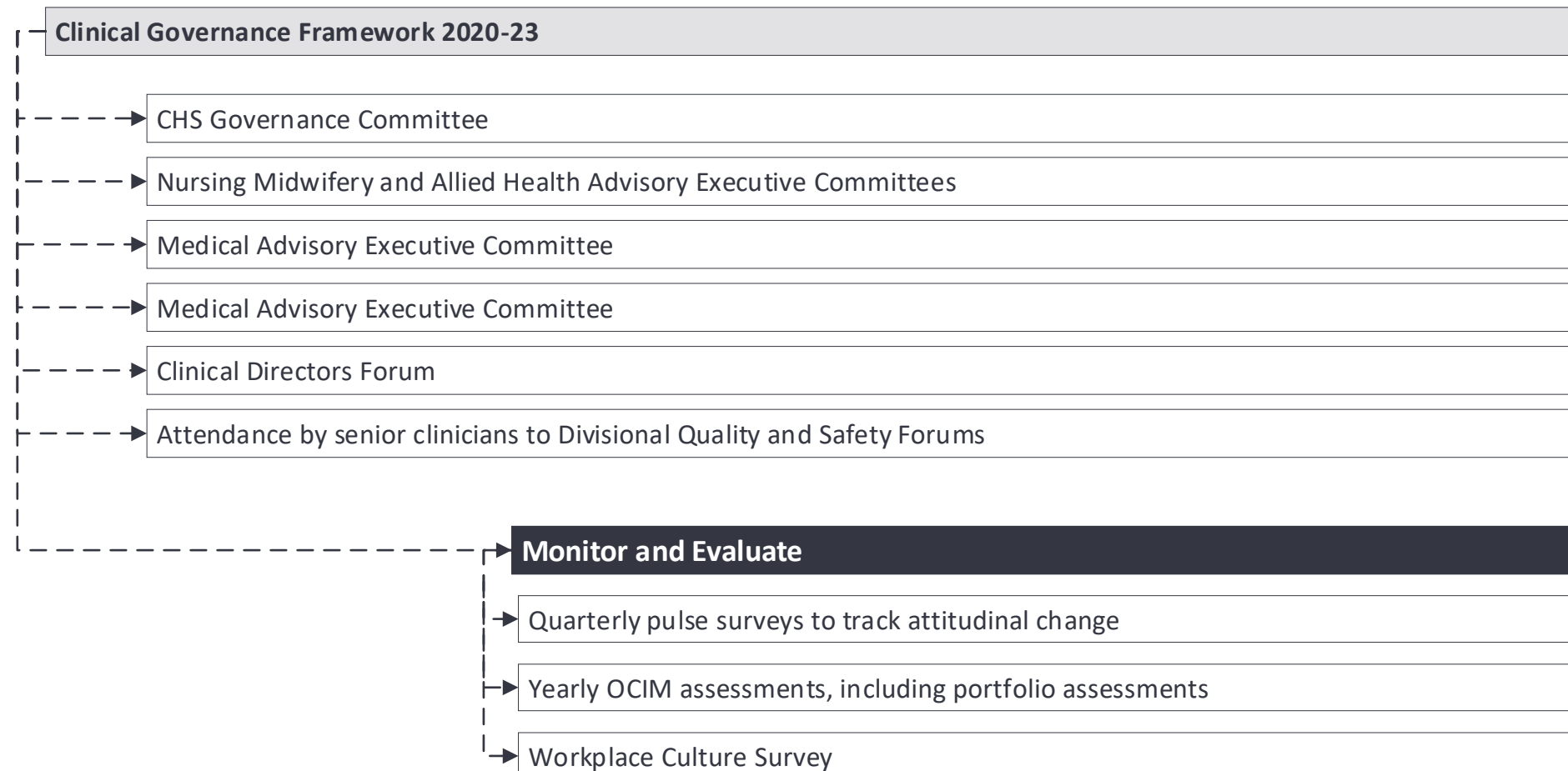
# Program Plan 2019-2022

## Structure and Engagement



### Clinical Governance (Recommendation 10)

#### Canberra Health Services





# Program Plan 2019-2022

## Structure and Engagement



### Clinical Governance (Recommendation 10)

Clinical Governance Committee (CPHB)

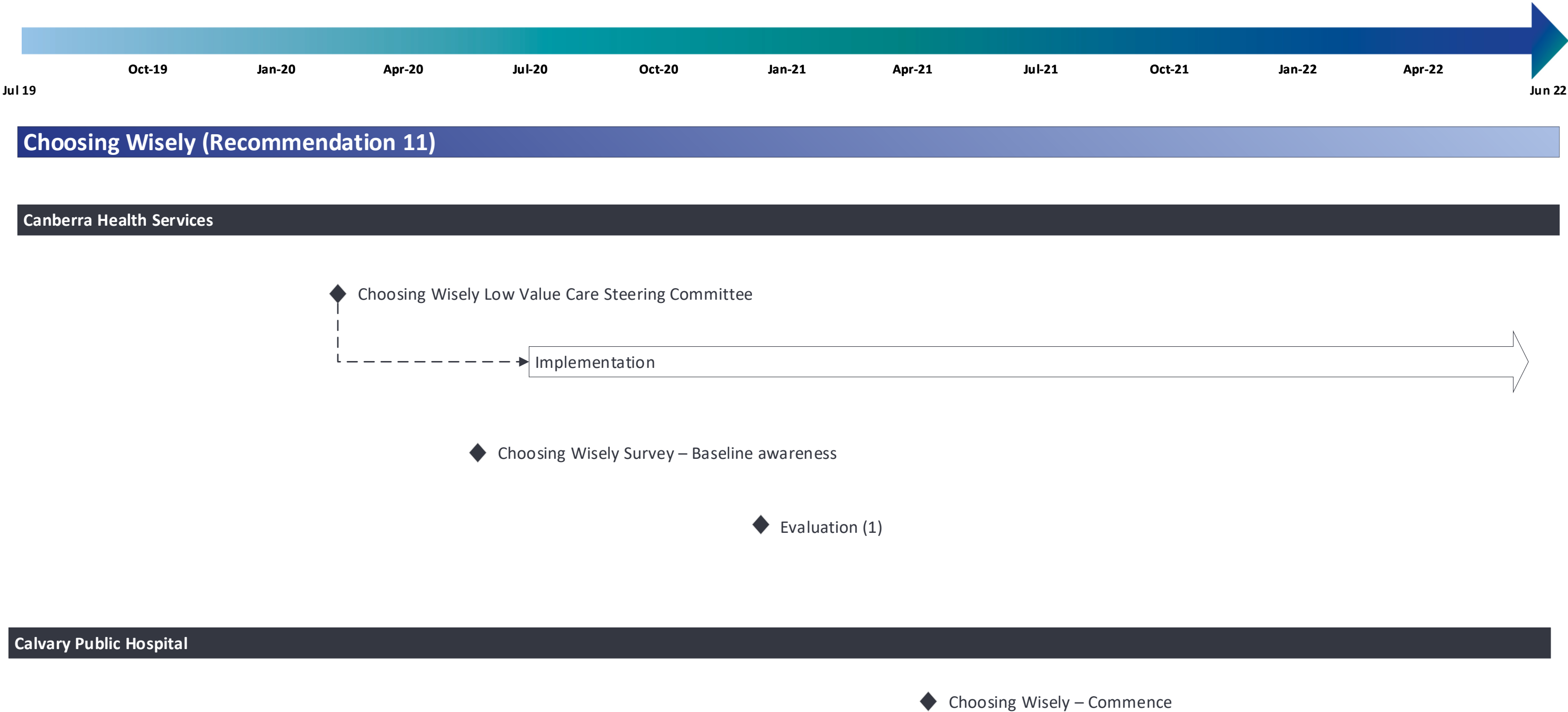
Clinical Governance Framework 2020-2023





# Program Plan 2019-2022

## Structure and Engagement



# Program Plan 2019-2022

## Structure and Engagement



### Clinically Qualified Divisional Directors (Recommendation 12)

#### Canberra Health Services

Operating model – Clinically qualified Clinical and Unit Directors

Pilot - Business Managers – Division of Medicine

----- Learnings implemented -----> Quality and safety, finance and HR Business Partners fully embedded across CHS

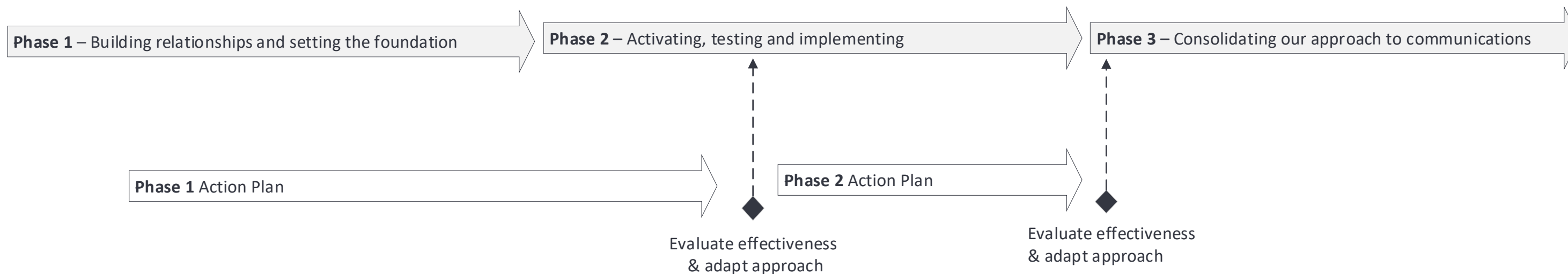
# Program Plan 2019-2022

## Structure and Engagement



### Communicating Outcomes (Recommendation 20)

### Communications and Engagement Strategy





# Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

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**Agenda Item:** 5.3

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**Topic:** Implementation of Recommendations and Project Plan

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**Meeting Date:** 9 August 2021

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**Action Required:** Noting

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**Cleared by:** Director-General, ACT Health Directorate

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**Presenter:** Executive Branch Manager, Culture Review Implementation Branch

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## Purpose

1. To provide the Culture Review Oversight Group (Oversight Group) with an update on the progress made in implementing the recommendations of the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services* (the Review).

## Background

2. This is a standing agenda item to provide an ongoing status update on the progress of work being undertaken to implement the Review recommendations.
3. Project planning documentation to support the mapping and reporting of progress made in addressing the recommendations was tabled at the Culture Review Oversight Group (Oversight Group) meeting on 4 September 2019. The documentation has continued to evolve.
4. Feedback on the implementation planning documentation was invited from Oversight Group members. To date no feedback has been received, however members are encouraged to provide feedback to the Secretariat as the planning documentation evolves.

## Issues

5. The Implementation of Recommendation Status Update at Attachment A provides information on system-wide and organisation specific activities against each of the recommendations in the Review. It includes a timeline for each activity, identifies where there is variance from the implementation timeline outlined in the Review and indicates achievement of actions and recommendations.
6. Significant progress has been made by each organisation in completing actions across a range of recommendations.

7. There are a total of **92** Actions that need to be completed across the ACT public health system to implement the **20** Recommendations of the Review.
8. The following table summarises the status of the implementation of the 92 Actions:

<b>On Track</b>	<b>28</b> Actions are in progress and on track to be delivered by the agreed date
<b>At Risk</b>	<b>2</b> Actions are at risk of being delayed by more than 12 weeks
<b>Delayed</b>	<b>5</b> Actions are delayed by more than 12 weeks
<b>Completed</b>	<b>58</b> Actions have been completed

9. The following table summarises Actions that are reported as **At Risk** or **Delayed**:

<b>Action 13.1</b> Planning	Culture Review Implementation Branch	<b>Delayed</b>
<b>Action 19.2</b> Annual Review	Culture Review Implementation Branch	<b>Delayed</b>
<b>Action 2.2</b> Implement and monitor a suite of measures	ACT Health Directorate	<b>Delayed</b>
<b>Action 7.1</b> Review existing arrangements (develop relationships, define positions) (Research Strategy)	ACT Health Directorate	<b>Delayed</b>
<b>Action 7.2</b> Produce academic partnership and training strategy	ACT Health Directorate	<b>Delayed</b>
<b>Action 7.3</b> Implement academic partnership and training strategy	ACT Health Directorate	<b>At Risk</b>

10. Status of the implementation of Recommendations by each organisation is summarised below:

Culture Review Implementation Branch	<b>6 of 9</b> Recommendations completed
ACT Health Directorate	<b>1 of 11</b> Recommendations completed
Canberra Health Services	<b>7 of 12</b> Recommendations completed
Calvary Public Hospital	<b>4 of 10</b> Recommendations completed

11. A total of **8** Recommendations have been endorsed as fully completed by all responsible parties:
- a. *Recommendation 5* (Review mechanisms to better integrate clinical streams of the community health services within the Clinical Divisional Structures in CHS);
  - b. *Recommendation 8* (Memorandum of Understanding (MoU) for improved collaboration between the ACT and NSW public health systems for joint Ministerial consideration);
  - c. *Recommendation 10* (Clear requirement for senior clinicians to collaboratively participate in clinical governance activities);
  - d. *Recommendation 11* (Choosing Wisely program);
  - e. *Recommendation 12* (Clinically qualified Divisional Directors across each Clinical Division with Business Manager support within CHS);
  - f. *Recommendation 17* (Public Commitment);
  - g. *Recommendation 18* (Culture Review Oversight Group); and
  - h. *Recommendation 20* (Change Management and Communications Strategy).

### **Recommendation**

That the Oversight Group:

- *Note the information provided in this paper; and*
- *Note the information contained in the Implementation of Recommendations and Project Plan report at Attachment A.*

**Key:**

IMPLEMENTATION TIMELINE (As per Final Report)
ADJUSTED IMPLEMENTATION TIMELINE (Endorsed by Steering Group)
CURRENT IMPLEMENTATION STATUS
ACTION COMPLETED

**Overall Status of Recommendation 1:**  
**On Track**  
 • Recommendation 1 has been completed by Canberra Health Services and Calvary Public Hospital.



[illegible]

RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
	People and Culture, Canberra Health Services	A2.1: Commence developing suite of measures	This action has been completed.			Baseline 1		Baseline 2										COMPLETE
		A2.2: Implement and monitor suite of measures	This action has been completed.					Baseline 1		Baseline 2								COMPLETE
		A2.3: Conduct 2019 staff survey (evaluate)	This action has been completed.				B1											COMPLETE
		A2.4: Conduct 2021 staff survey (evaluate)	This action is in progress.  • The Workplace Culture Survey 2021 will commence in October 2021 and will be used as a measure to reflect on a great health service and to identify focus areas. • Planning is underway with survey questions being reviewed, particularly their alignment to the measures in the Organisational Culture Improvement Model.													B2		ON TRACK
	Great Workplaces Program, Calvary Public Hospital Bruce	A2.1: Commence developing suite of measures	This action has been completed.  Endorsed as completed at the May 2021 meeting of the Culture Review Implementation Steering Group.			Baseline 1	Baseline 2											COMPLETE
		A2.2: Implement and monitor suite of measures	This action has been completed.  Endorsed as completed at the May 2021 meeting of the Culture Review Implementation Steering Group.					Baseline 1		Baseline 2								COMPLETE
		A2.3: Conduct 2019 staff survey (evaluate)	This action has been completed.				B1	Baseline 2										COMPLETE
		A2.4: Conduct 2021 staff survey (evaluate)	This action is in progress.  The next engagement survey is planned for August 2021.												B2		B1	ON TRACK
<b>Overall Status of Recommendation 2:</b> <b>AT RISK</b> • This Recommendation is on track to be completed within the agreed timeframe by Canberra Health Services and Calvary Public Hospital. • Action 2.2 (ACT Health Directorate) has exceeded the agreed implementation timeframe by more than 12 weeks.																		



RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
<b>Recommendation 4 of the Final Report, March 2019</b> <i>The ACT Health Directorate convene a summit of senior clinicians and administrators of both Canberra Health Services and Calvary Public Hospital to map a plan of improved clinical services</i>	Health Systems, Policy and Research, ACT Health Directorate	<b>A4.1:</b> Plan and conduct first summit	<b>This action is in progress.</b>														ON TRACK	
			Update was not provided for this reporting period.															
<b>Overall Status of Recommendation 4:</b> On Track																		
<b>Recommendation 5 of the Final Report, March 2019</b> <i>The CEO of Canberra Health Services should review mechanisms to better integrate clinical streams of the community health services within the Clinical Divisional Structures.</i>	People and Culture, Canberra Health Services	<b>A5.1:</b> Review mechanisms and integrate Community Health Services	<b>This action has been completed.</b>														COMPLETE	
		<b>A5.2:</b> Evaluate	<b>This action has been completed.</b>															COMPLETE
<b>Overall Status of Recommendation 5:</b> This recommendation has been completed.																		
<b>Recommendation 6 of the Final Report, March 2019</b> <i>That the ACT Health Directorate re-establish open lines of communication with the NGO sector and other external stakeholders.</i>	Health Systems, Policy and Research, ACT Health Directorate	<b>A6.1:</b> Commence re-opening of communication lines	<b>This action has been completed.</b>														COMPLETE	
			<b>A6.2:</b> Establish NGO Leadership Group	<b>This action has been completed.</b>														
		<b>A6.3:</b> Evaluate	<b>This action is in progress.</b>														ON TRACK	
			Update was not provided for this reporting period.															
<b>Overall Status of Recommendation 6:</b> On Track This Recommendation is on track to be completed within the agreed timeframe.																		

RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
<b>Recommendation 7 of the Final Report, March 2019</b> <i>The initiatives already underway to develop a valued and more coordinated research strategy in partnership with the academic sector and others are strongly supported. These provide a mechanism to encourage professional development and address culture, education, training, research and other strategic issues.</i>	Centre for Health and Medical Research, ACT Health Directorate	A7.1: Review existing arrangements (develop relationships, define positions)	This action is in progress.  Update not provided for this reporting period.															DELAY
			A7.2: Produce academic partnership and training strategy	This action is in progress.  Update was not provided for this reporting period.														
		A7.3: Implement academic partnership and training strategy	This action has not yet commenced.  Update not provided for this reporting period.															AT RISK
<b>Overall Status of Recommendation 7:</b> On Track This Recommendation has been reported as on track.																		
<b>Recommendation 8 of the Final Report, March 2019</b> <i>That discussions occur between ACT and NSW with a view to developing a Memorandum of Understanding (MoU) for improved collaboration between the two health systems for joint Ministerial consideration.</i>	Partnerships and Programs, ACT Health Directorate	A8.1: Commence negotiations	This action has been completed.															COMPLETE
			A8.2: Implement MOU	This action has been completed.														
<b>Overall Status of Recommendation 8:</b> This Recommendation was endorsed as closed by the Steering Group at the May 2021 meeting.																		

RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS	
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2		
<b>Recommendation 9 of the Final Report, March 2019</b> <i>Clinical engagement throughout the ACT public health system, particularly by the medical profession, needs to be significantly improved. Agreed measures of monitoring such improvement needs to be developed through consensus by both clinicians and executives. Such measures should include participation in safety, quality and improvement meetings, reviews and other strategy and policy related initiatives.</i>	People and Culture, Canberra Health Services	A9.1: Agree measures	This action has been completed.															COMPLETE	
	A9.2: Ongoing monitoring and reporting	This action has been completed.																COMPLETE	
	Great Workplaces Program, Calvary Public Hospital Bruce	A9.1: Agree measures	This action has been completed.																COMPLETE
A9.2: Ongoing monitoring and reporting	This action is in progress.																	ON TRACK	
	Update not provided this reporting period.																		
<b>Overall Status of Recommendation 9:</b> On Track • This Recommendation has been completed by Canberra Health Services.																			
<b>Recommendation 10 of the Final Report, March 2019</b> <i>There should be a clear requirement for senior clinicians to collaboratively participate in clinical governance activities.</i>	People and Culture, Canberra Health Services	A10.1: Develop governance participation plan	This action has been completed.															COMPLETE	
		A10.2: Commence participation	This action has been completed.																COMPLETE
	A10.3: Monitor participation	This action has been completed.																COMPLETE	
	Great Workplaces Program, Calvary Public Hospital Bruce	A10.1: Develop governance participation plan	This action has been completed.																COMPLETE
		A10.2: Commence participation	This action has been completed..																COMPLETE
A10.3: Monitor participation	This action has been completed.																	COMPLETE	
<b>Overall Status of Recommendation 10:</b> This recommendation has been completed.																			

RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
<b>Recommendation 11 of the Final Report, March 2019</b> <i>Canberra Health Services and Calvary Public Hospital should assess the appropriateness of the Choosing Wisely initiative as a mechanism for improving safety and quality of care, developing</i>	People and Culture, Canberra Health Services	A11.1: Assess Program	This action has been completed.		Baseline 1												COMPLETE	
					▶													
	A11.2: Implement and monitor	This action has been completed.				Baseline 1												COMPLETE
				▶														
	Great Workplaces Program, Calvary Public Hospital Bruce	A11.1: Assess Program	This action has been completed.		Baseline 1												COMPLETE	
					▶													
A11.2: Implement and monitor	This action has been completed.					Baseline 1												COMPLETE
						▶												
<b>Overall Status of Recommendation 11:</b> This recommendation has been completed.																		
<b>Recommendation 12 of the Final Report, March 2019</b> <i>That Canberra Health Services adopt the progressive evolution of clinically qualified Divisional Directors across each Clinical Division with Business Manager support and earned autonomy in financial and personnel management.</i>	People and Culture, Canberra Health Services	A12.1: Conduct pilot	This action has been completed.		Baseline 1												COMPLETE	
					▶													
	A12.2: Rollout full recommendations	This action has been completed.								Baseline 1							COMPLETE	
						▶												
<b>Overall Status of Recommendation 12:</b> This Recommendation has been completed.																		



RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
<b>Recommendation 13 of the Final Report, March 2019</b> <i>That an executive leadership and mentoring program be introduced across the ACT public health system specifically designed to develop current and future leaders. This program should include both current and emerging leaders.</i>	System-wide, led by Culture Review Implementation Branch (CRI Branch)	A13.1: Planning	<b>This action is in progress.</b>  <u>Management Fundamentals</u> • An Open Tender for a consultancy to design Management Fundamentals training for the ACT public health system was released in May 2021. Evaluation of responses will be completed July 2021. Pending successful contract negotiations, a contract will be executed with the successful Tenderer in August.  <u>Leadership Program</u> • Scoping workshops to confirm the requirements for a system-wide leadership development program have been undertaken. An Open Tender for development of Leadership Training for the ACT public health system is expected to be released by September 2021.  <u>Mentoring Program</u> • The Steering Group agreed at the May meeting that mentoring programs would be developed within each organisation rather than a system-wide approach.															AT RISK
	People Strategy, ACT Health Directorate	A13.2: Implementation	<b>This action is in progress.</b>  • Development of the whole of public health system management fundamentals training program continues. Procurement evaluation is underway.															ON TRACK
	People and Culture, Canberra Health Services	A13.2: Implementation	<b>This action is in progress.</b>  • Work is progressing in partnership with ACT Health Directorate and Calvary on the development of management and leadership training programs with procurement activity underway to engage expertise in the design and development of management fundamentals and leadership training programs for the health system. • A CHS mentoring program is to be explored and implemented following the implementation of management fundamentals training.															ON TRACK
	Great Workplaces Program, Calvary Public Hospital Bruce	A13.2: Implementation	<b>This action is in progress.</b>  Update not provided for this reporting period.															ON TRACK
	<b>Overall Status of Recommendation 13:</b> <b>At Risk</b> • This Recommendation is at risk of being delayed by more than 12 weeks from agreed timeline.																	

RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
<b>Recommendation 14 of the Final Report, March 2019</b> <i>The three arms of the ACT public health system should review their HR staffing numbers and functions in response to the concerns staff have expressed regarding timeliness and confidence in</i>	System-wide, led by Culture Review Implementation Branch (CRI Branch)	A14.1: Conduct initial review	This action has been completed.		Baseline 1			BASELINE 2										COMPLETE
	People Strategy, ACT Health Directorate	A14.2: Implement changes	This action is in progress.  • The HR Functions Review report was received in November 2020. The Directorate is considering the report as part of a service redesign and restructure of HR and culture improvement functions. • There is significant work underway to develop the People Strategy and Culture plan for 2021-22., and then to establish a strategic plan for 2022-2025. • Review of structure and resourcing is underway.				Baseline 1		BASELINE 2									ON TRACK
		A14.3: Evaluate	This action has not commenced.  Update was not provided for this reporting period.															ON TRACK
	People and Culture, Canberra Health Services	A14.2: Implement changes	This action is in progress.  • CHS are seeking approval from the Steering Group to re-baseline delivery timeframe.				Baseline 1		BASELINE 2									ON TRACK
		A14.3: Evaluate	This action has not yet commenced.  • This action is pending approval to re-baseline timeframe. • To be progressed once HR Functions Review findings are fully implemented. • A HR Functions Review evaluation plan will be established to guide evaluation approach.															ON TRACK
Great Workplaces Program, Calvary Public Hospital Bruce	A14.2: Implement changes	This action has not yet commenced.  Update was not provided for this reporting period.				Baseline 1		BASELINE 2									ON TRACK	
	A14.3: Evaluate	This action has not commenced.  Update was not provided for this reporting period.															ON TRACK	
Overall Status of Recommendation 14: On Track																		

RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
<b>Recommendation 15 of the Final Report, March 2019</b> <i>The recruitment processes in the ACT public health system should follow principles outlined in the Enterprise Agreements, Public Sector Management Act 1994 and relevant standards and procedures.</i>	People Strategy, ACT Health Directorate	A15.1: Review staff advice including intranet material and implement changes as required	This action has been completed.		Baseline 1												COMPLETE	
		A15.2: Continually monitor/evaluate recruitment activity	This action is in progress.  • ACTHD is progressing an independent recruitment review to assess progress made and to identify areas where the organisation could progress and evolve further.				Baseline 1										ON TRACK	
	People and Culture, Canberra Health Services	A15.1: Review staff advice including intranet material and implement changes as required	This action has been completed.		Baseline 1		Baseline 2										COMPLETE	
		A15.2: Continually monitor/evaluate recruitment activity	This action has been completed.				Baseline 1										COMPLETE	
Great Workplaces Program, Calvary Public Hospital Bruce	A15.1: Review staff advice including intranet material and implement changes as required	This action has been completed.		Baseline 1												COMPLETE		
	A15.2: Continually monitor/evaluate recruitment activity	This action is in progress.  Update not provided for this reporting period.				Baseline 1										ON TRACK		
<b>Overall Status of Recommendation 15:</b> On Track • This recommendation has been completed by Canberra Health Services.																		

RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
<b>Recommendation 16 of the Final Report, March 2019</b> <i>The range of training programs for staff offered by the ACT public health system should be reviewed with respect to their purpose, target audience, curriculum, training styles and outcomes so that they address the issues raised in this Review.</i>	System-wide, led by Culture Review Implementation Branch (CRI Branch)	A16.1: Conduct training program review	This action has been completed.	Baseline 1				Baseline 2										COMPLETE
																		COMPLETE
	People Strategy, ACT Health Directorate	A16.1: Conduct training program review	This action has been completed.	Baseline 1				Baseline 2										COMPLETE
																		COMPLETE
		A16.2: Implement changes	This action is in progress.			Baseline 1		Baseline 2										ON TRACK
																		ON TRACK
	People and Culture, Canberra Health Services	A16.1: Conduct training program review	This action has been completed.	Baseline 1				Baseline 2										COMPLETE
																		COMPLETE
		A16.2: Implement changes	This action is in progress. <ul style="list-style-type: none"><li>• This action is pending approval to re-baseline timeframe.</li><li>• Work is underway to redesign the internal training programs against the review recommendations and the CHS Management and Leadership Strategy, which will be completed by August 2021.</li><li>• Identification of subject gaps in the current suite of people training programs and development of content to address these gaps will be progressed, along with integrating evaluation into the learning design phase of each program.</li></ul>			Baseline 1		Baseline 2										ON TRACK
																		ON TRACK
Great Workplaces Program, Calvary Public Hospital Bruce	A16.1: Conduct training program review	This action has been completed.	Baseline 1				Baseline 2										COMPLETE	
																	COMPLETE	
	A16.2: Implement changes	This action has not yet commenced.  Update not provided for this reporting period.			Baseline 1		Baseline 2										ON TRACK	
																	ON TRACK	
Overall Status of Recommendation 16: On Track																		

RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS UPDATE	2019				2020				2021				2022		STATUS
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
<b>Recommendation 17 of the Final Report, March 2019</b> <i>Should the recommendations of this Review be accepted, a public commitment should be jointly made by the Ministers for Health and Wellbeing, and Mental Health, the Director-General ACT Health Directorate, the CEO Canberra Health Services, the General Manager Calvary Public Hospital and key representative organisations to collectively implement the recommendations of this Review to ensure ongoing cultural improvement across the ACT public health system.</i>	Minister and Executive	A17.1: Deliver public commitment	This action has been completed.		<div>Baseline 1</div> <div></div>												COMPLETE	
	<b>Overall Status of Recommendation 17:</b> This recommendation has been completed.																	
<b>Recommendation 18 of the Final Report, March 2019</b> <i>A ‘Cultural Review Oversight Group’ should be established to oversight the implementation of the Review’s recommendations. The Group should be</i>	Minister and CRI Branch	A18.1: Commence group activities	This action has been completed.		<div>Baseline 1</div> <div></div>												COMPLETE	
		A18.2: Bi-monthly group meetings	This action has been completed.		<div>Baseline 1</div> <div></div>											COMPLETE		
	<b>Overall Status of Recommendation 18:</b> This recommendation has been completed.																	
	<b>Recommendation 19 of the Final Report, March 2019</b> <i>That the ‘Cultural Review Oversight Group’ auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the</i>	System-wide, led by Culture Review Implementation Branch (CRI Branch)	A19.1: Annual Review (2020)	This action has been completed.					<div>Baseline 1</div> <div></div>									COMPLETE
A19.2: Annual Review (2021)			This action is pending approval to close. <div>• The second Annual Review is underway and is expected to be completed August 2021.</div>							<div>Baseline 1</div> <div></div>					DELAY			
A19.3: Annual Review (2022)			The final Annual Review will be undertaken in the first quarter of 2022.											<div>Baseline 1</div> <div></div>		ON TRACK		
<b>Overall Status of Recommendation 19:</b> At Risk																		
<b>Recommendation 20 of the Final Report, March 2019</b> <i>As a result of this Review, the Culture Review Oversight Group should engage with staff in the development of a change management strategy which clearly articulates to staff, patients/clients and the community the nature of the issues to be addressed and the mechanisms for doing it.</i>		System-wide, led by Culture Review Implementation Branch (CRI Branch)	A20.1a: With staff, collaboratively develop a communication strategy	This action has been completed.		<div>Baseline 1</div> <div></div>											COMPLETE	
	A20.1b: With staff, collaboratively develop a change management strategy		This action has been completed.		<div>Baseline 1</div> <div></div>				<div>Baseline 2</div> <div></div>						COMPLETE			
	<b>Overall Status of Recommendation 20:</b> This recommendation has been completed.																	



## Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

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**Agenda Item:** 5.4

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**Topic:** Culture Review Implementation Program Risk

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**Meeting Date:** 9 August 2021

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**Action Required:** Noting

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**Cleared by:** Director-General, ACT Health Directorate

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**Presenter:** Executive Branch Manager, Culture Review Implementation Branch

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### Purpose

1. To provide the Culture Reform Oversight Group with an update of key program risks identified for the Culture Review Implementation Program.

### Background

2. Project risk and issues management is proactive throughout the life of the program. The early consideration of risks at the outset and as an iterative process will have significant implications for the overall success of the Culture Review Implementation program.
3. Failure to undertake effective project risk and issues management will result in cost overruns, schedule slippage and shortfalls in capability and resourcing. Effective project risk and issues management is essential to anticipate, understand and manage risks.
4. The risk register is intended to be a living document that is reviewed monthly and updated as required.

### Issues

5. There are **46 active** risks identified in the Program Risk Register.
6. The overall risk profile for the Program is as follows:

Risk Category	Low	Medium	High	Extreme
Commercial	1	0	0	0
Financial	1	2	0	0
Governance	3	3	0	0

People	0	4	1	0
Project	1	4	0	0
Reputation and Image	1	2	0	0
Stakeholder Management	0	5	1	0
Strategy	0	16	1	0
<b>TOTAL</b>	<b>7</b>	<b>36</b>	<b>3</b>	<b>0</b>

7. One new risk with a rating of **High** has been identified for the culture program (Risk ID 22: Loss of key personnel compromises delivery of program).
8. An Executive Summary of risks with a risk rating of **High** and **Extreme** is at Attachment A.
9. The Risk Register continues to be reviewed monthly to assess the effectiveness of existing controls and to identify and execute additional treatments.

### Consultation

10. The Culture Review Implementation Branch is facilitating regular program meetings with the organisation culture delivery leads. These regular meeting provides a forum to discuss risks that have been identified within each organisation, ensure dependencies are identified and managed across the system, and ensure local risks are captured on the Program Risk Register and appropriately escalated to the Culture Review Implementation Steering Group.

### Recommendation

That the Oversight Group:

- *Note that key program risks are being monitored and managed.*





# Culture Review Implementation

our journey of positive change



## Executive Overview of the Culture Implementation Program Risk Register - 31 July 2021

Risk Rating	Risk	Source	Impact	Controls (best of)	
High	<u>Risk Ref ID: 43</u> <i>Sustainability of culture reform after program ends.</i>	<ul style="list-style-type: none"><li>• Delivery of recommendations is not sufficient to transform culture and embed sustainable change.</li><li>• Program duration may be inadequate to build the foundations required for sustained culture reform.</li><li>• Effective governance and oversight to continue strategic delivery and evaluation of interventions and realisation of benefits after program ends.</li><li>• Capability and capacity within organisations to deliver and sustain culture reform after program ends.</li><li>• Agreement on strategic approach for ensuring sustainability of culture reform across the system.</li><li>• Lack of centralised team to ensure continuous and sustained improvement and measurement of progress across entire health System following end of program.</li><li>• Budget and resourcing constraints.</li></ul>	<ul style="list-style-type: none"><li>• Culture reform is not sustained after program ends in June 2022.</li><li>• Inconsistent approaches or approaches that lack strategic direction are applied across the system following end of program resulting in culture reform not being sustained.</li><li>• Effectiveness and impact of interventions is not measured or evaluated to inform targeted approaches and ongoing improvement.</li></ul>	<ul style="list-style-type: none"><li>• Early consultation is underway to inform the strategic approach for ensuring sustainability of culture reform across the system.</li></ul>	Same



Risk Rating	Risk	Source	Impact	Controls (best of)	
High	<i>Risk Ref ID 50</i> <i>Limited understanding of organisational direction for resolving workforce culture issues.</i>	<ul style="list-style-type: none"> <li>• Organisation does not have an endorsed strategy for addressing workforce and culture issues.</li> <li>• Organisation priorities and actions do not align with the strategic direction for culture reform across system.</li> <li>• Limited engagement with Senior Executives and workforce about climate survey and pulse survey results, post-survey actions and linkages to strategic direction for culture reform.</li> <li>• Limited active engagement with Executives to support the investigation of themes and development of appropriate action plans.</li> <li>• Limited accountability for developing and delivering appropriate action plans and communicating progress and outcomes to the workforce.</li> <li>• Lack of internal strategic communications plan to manage messaging to the workforce.</li> </ul>	<ul style="list-style-type: none"> <li>• Organisation strategy, priorities, and actions for advancing culture reform are not clear.</li> <li>• Misalignment of organisation workforce culture reform priorities and system-wide priorities.</li> <li>• Staff are not aware of the investment being made in the workforce and the benefits of change.</li> <li>• Expectations of staff are not clear.</li> <li>• Potential for distrust in organisation due to insufficient information about what is being progressed within the organisation and how this will support staff.</li> <li>• Staff do not feel heard.</li> <li>• Continued reporting of poor workforce culture.</li> </ul>	<ul style="list-style-type: none"> <li>• Increased focus on internal culture strategy and alignment to system-wide culture work.</li> <li>• OCIM assessment to be undertaken from June 2021. This will inform discussion on progress towards achieving targets set in July 2020 and setting of new targets, priorities, and actions for 2021-22.</li> <li>• Divisional unit level OCIM assessments will also be piloted within ACT HD in 2021. These will link in with the organisational level OCIM assessment.</li> <li>• OCIM assessments will link in with 2021-22 business planning.</li> <li>• OCIM, climate and pulse surveys, and analysis of workforce data will inform discussions about areas of focus, priorities, and actions for the next 12 months.</li> <li>• CRI Branch continues to work with internal communications teams to develop frequent and targeted system-wide communications.</li> </ul>	Same
High	<i>Risk Ref ID 22</i> <i>Loss of key personnel compromises delivery of program.</i>	<ul style="list-style-type: none"> <li>• Changes in key leadership positions across the System.</li> <li>• Changes to key personnel responsible for leading, directing or supporting the Culture Review Implementation across the System.</li> </ul>	<ul style="list-style-type: none"> <li>• Speed of decision making and action is reduced due to limited knowledge or understanding of the program, past and present context and decisions, strategic direction, and environment in which the culture program operates.</li> <li>• New personnel may not agree with the strategic direction resulting in impacts to program delivery and agreed outcomes.</li> <li>• Impact to stakeholder relationships and engagement.</li> <li>• Efficient and effective delivery of culture implementation is compromised.</li> <li>• Culture Review Implementation program unable to establish foundation for sustainable cultural reform prior to completion of program.</li> <li>• Failure to deliver strategic objectives and outputs.</li> </ul>	<ul style="list-style-type: none"> <li>• Strong governance structure established to oversee strategic direction for program.</li> <li>• Documentation of decisions and agreed approaches through Steering Group and Oversight Group papers and action logs.</li> <li>• Program planning and progress reporting provided to Steering Group and Oversight Group bi-monthly.</li> <li>• Stakeholder engagement.</li> </ul>	Increasing



# Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

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**Agenda Item:** 5.6

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**Topic:** Culture Review Implementation Budget Update 2021/22

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**Meeting Date:** 9 August 2021

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**Action Required:** Noting

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**Cleared by:** Director-General, ACT Health Directorate

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**Presenter:** Director-General, ACT Health Directorate

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## Purpose

1. To provide Culture Reform Oversight Group (Oversight Group) members with an update on the 2021/22 Culture Review Implementation budget.

## Background

2. The Culture Review Implementation Steering Group (Steering Group) facilitates the implementation of the recommendations of *the Final Report: Independent Review into the Workplace Culture Within ACT Public Health Services* (Culture Review) and is responsible for the clear and effective governance of the program.
3. At the Steering Group meeting held on 19 May 2021, the group considered the budget for the culture program for the 2021/22 financial year, endorsing the proposed funding allocations at that meeting.
4. A further out of session meeting was held on 22 June 2021 to reconsider budget allocations as the initial allocations exceed the available budget.

## Issues

5. The Oversight Group was provided with the minutes of the Steering Group meetings where the budget for 2021/22 was considered.

6. Following is a summary of the final allocations endorsed by the Steering Group for the 2021/22 financial year:

<b>Budget Item</b>	<b>2021/22 Allocation</b>
CRI Branch Staffing	\$960,223
Annual Review (2022)	\$150,000
Middle Management Leadership Training Program	\$500,000
Culture Reform Oversight Group – Working Groups	\$150,000
<i>ACTHD Staffing and activities</i> (\$111,780 to be paid to CHS for Workplace Resolution & Support Services resources)	\$292,466
<i>CPHB Staffing and activities</i>	\$722,422
<i>CHS staffing and activities</i>	\$1,224,889
<b>Total</b>	<b>\$4,000,00</b>

### **Recommendation**

That the Oversight Group:

- *note the information provided in this paper.*